

# Brighton & Hove North Integrated Community Team Population Profile Pack

November 2023

#### **Brighton and Hove North Integrated Community Team**



LSOA (2021) based ICT boundaries.

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## Introduction

16 geographically based Integrated Community Teams (ICTs) across Brighton and Hove, West and East Sussex have now been agreed.

The ICT Programme Team have since implemented an ICT Data Group, enabling ICB, Public Health, Local Authority, VCSE and wider stakeholders to meet and collaborate regularly in the development and design of Sussex ICT data core profiles.

The Sussex ICT model, will be driven by data and reflective of population needs. To do this effectively we need to access a variety of data sets that enable us to understand each of the ICTs' local demographics, health needs, social determinants and wider determinants of health.

Different data sources complimented by Local Knowledge and Community Insight will be key in highlighting specific needs and challenges faced by each ICTs population. This will allow us to construct the core offer that will be delivered by ICT delivery teams, design how these teams need to be configured and what might need further local tailoring due to marked differences in population need.

These opening ICT data packs are intended to set the scene for the ICTs. Whilst they alone will not provide the final answer, they are designed to help stimulate the questions which will. After initial release in December, the packs will develop further in response to feedback to help support the ICTs in their development.

# **Headline findings**

- Important to note the high percentage of the data only available at Brighton & Hove level which provided limited insight at an ICT level
- Population- North ICT neighbourhood has the largest population size of the city's four neighbourhood areas at 88,900 residents
- Population demographics- the North neighbourhood is heavily influenced by having two large university campuses in its geography, which is also highlighted through the disproportionate number of 15-19 and 20-24 year olds resident in the area.
- **Deprivation** the North ICT has 9 out of 52 local neighbourhoods featuring the CORE20 deprived neighbourhoods or 16.8% of the local population living in the most deprived neighbourhoods. Like other areas in the city there are areas of deprivation, particularly in Moulsecoomb and Hollingbury areas of the in the North neighbourhood
- Health services- the neighbourhood area includes 9 primary care practices spread across 3 different PCNs. Two practices have a strong focus on the local student population. There are more patients per GP, nurse or DPC than the Sussex average, with lower patient experience and QOF achievement as well as lower percentages of people on disease registers. This might be related to the younger student population but these indicators may also suggest more focus is required on engagement with the population to identify conditions and support involvement in health and care services. Brighton & Hove has a higher proportion of adult mental health admissions in which there was no prior contact with services.
- **Population health-** the key health statistics that stand out for the north neighbourhood is the prevalence of mental health. Local self-harm and suicide figures are a lot higher than the national figure and for 10-24 years olds self-harm admission rates are over double the national figure. This is consistent with the other ICT areas in the city. Brighton & Hove wide population health figures that standout are poorer immunisation and cancer screening rates, alcohol and drug misuse and adults with serious mental illness taking up a physical health check.
- **Health inequalities** local community and health professionals noted the influence of the high student population in the area and their specific health needs as an important focus in the north neighbourhood in addition to the more deprived areas.

These headlines were developed through the B&H ICT Steering Group which supports the work of the B&H Community Oversight Board

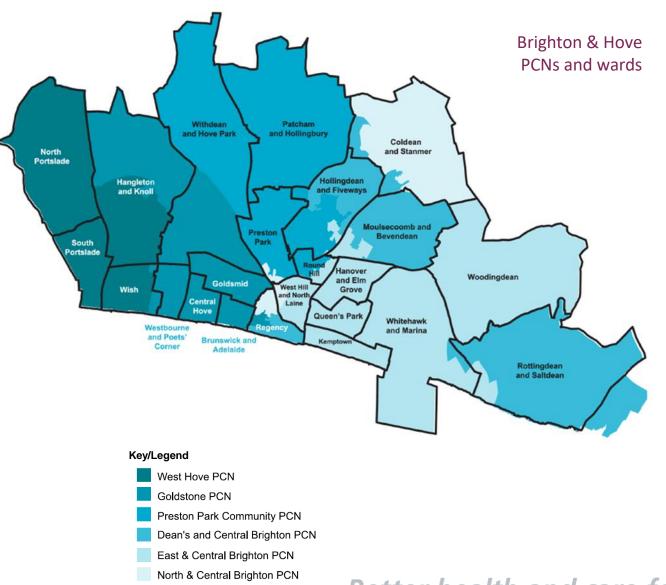
# **Brighton & Hove North ICT Geography**



The geography of the ICT is not an exact match with NHS practice/PCN catchment.

By general rule the slides on the health of the population will be split by ICT residents and those slides on use of healthcare services split by GP/PCN registered population.

Where slides deviate from this it is noted



# **Summary Contents 1**

Section	Slide	Contents	
Who lives here	Who lives in the ICT	Population, increases, reductions, broad age band %s	
	Key Demographics	Key demographic groups within the ICT	
	Population change	Age-sex profile and expected increase, including households	
	Population Projections	An ageing population	
Building blocks of health	Introduction	What do we mean by the building blocks of health	
	Deprivation	IMD, Core20, Child poverty, Benefits, Poverty, Earnings	
	Building blocks of health	Housing, Education, Employment, Crime	
What services are within the ICT	Map of services	Location of services within the ICT geography	

# **Summary Contents 2**

Section	Slide	Contents	
The Health of the Population	Health and Wellbeing across the life course	Headline summary of key indicators which are covered in more detail in the next 3 slides	
	Main Causes of ill health, life expectancy and inequalities	Life expectancy, mortality and inequality	
	Main Causes contributing to the gap in life expectancy	Causes of inequality in life expectancy	
	Key risk factors for main causes of death	Risk factors are behind the main causes of death	
	Starting Well	Outcomes and factors affecting people at the start of life	
	Living Well	Outcomes and factors affecting people during Adult life	
	Ageing Well	Outcomes and factors affecting people in older age	
	Dying well	Palliative Care and deaths	

# **Summary Contents 3**

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Section	Slide	Contents	
Healthcare services - Primary Care	Primary Care services	Size and number of GP Practices, Enhanced Services	
	Long Term Conditions (Disease Burden)	Disease Registers and QOF	
	Other Primary care in the ICT	Dental Activity, vaccination levels and medicines use	
Healthcare services - MHLDA	Mental Health and Learning Difficulties	Dementia Diagnosis Rate, Learning Disabilities AHC, Talking therapies,	
Healthcare services - Community	Community Health Services	Community Nursing, Community Beds, Community Services	
Healthcare services - Non Urgent Care	Planned Care alternatives and Cancer	Advice and Guidance, DNA rates, PIFU, Cancer waiting times, FIT testing	
	Planned Care	New Outpatients, Follow Up Outpatients, Outpatients with Procedures, Daycase and Elective Inpatients, OPProc:DC:EL ratio	
Healthcare Services - UEC	Urgent and Emergency Care	111 calls, 999 calls, Ambulance Mobilisations	
	Acute Urgent Care	Emergency Inpatients, Long stay patients	
	Care Homes: Urgent Healthcare use	Carehome numbers, 999 call rates, A&E and emergency admission rates	
Adult Social Care	Adult Social Care	Contacts, patients receiving Long Term Support, Reported Quality of Life, Safeguarding concerns	
Appendix	Links to useful sites	For more detail on the headlines in this pack	

l care for all

# Who lives in Brighton & Hove North ICT

Around 88,900 people live in Brighton and Hove North ICT (202: Census), an increase of 1.3% since 2011

For the **whole of Brighton & Hove** Between 2011 and 2020 there have been

25,374 Births

19,227 Deaths

10,430 estimated **decrease** from internal UK migration

22,980 estimated increase from international migration

Census 2021 data for the ICT:

24% of the population is under 20, compared to 23% for England

14% of the population is 65 or over, compared to 18% for England

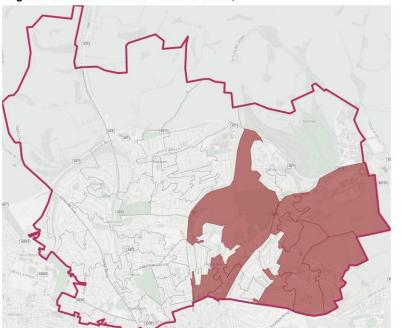
2.0% of the population is 85 or over, compared to 2.4% for England

1,014 residents aged 65+ live in a care home (with or without nursing) in the whole of Brighton and Hove

#### **Brighton and Hove North Integrated Community Team**



Brighton and Hove North ICT Core20 areas;



LSOA (2021) based ICT boundaries. © Stadia Maps; © OpenStreetMap contributors

Of the 52 neighbourhoods (2011 based LSOAs) in the Brighton and Hove North ICT, there are **9 Core20 neighbourhoods** (representing the most deprived 20% of neighbourhoods nationally) with a population of approximately 14,900 residents (Census 2021).

ealth and care for all

Core 20 neighbourhood

## Key Demographic Groups within Brighton & Hove **North ICT**

Brighton & Hove North ICT has a younger age structure than England, with proportionally fewer young children, but more young adults, and fewer older people.

Residents are more likely, than across England, to be:

- LGB+ 1 in 12 adults:
- Trans 1 in 100 adults;
- Never married/in a civil partnership – 1 in 2 adults
- Or to have no religion or belief - more than 1 in 2 adults

## **Brighton & Hove North ICT population groups**

#### Age

Brighton & Hove North has a younger age structure than England:

- 24.5% of people are aged under 20 (23%)
- 61.7% aged 20-64 (58%)
- 13.8% aged 65+ (18%)

## **Gender identity**

0.8% of adults aged 16+ identified as Trans in the 2021 Census (0.5%)

#### Children in care

At the end of March 2022, there were 382 children aged 0-17, 82 per 10,000, living in care in Brighton &

Hove (England 70 per 10,000)

UTLA

## **Ethnicity**

23.8% of people are Black or racially minoritised\* (27%):

- 4.9% Asian or Asian British (10%)
- 2.1% Black or Black British (4%)
- 4.8% Mixed or multiple ethnic group (3%)

8.6% of those aged 16+ identified as

minority sexual orientation) (3%)

LGB+ (gay or lesbian, bisexual or other

- 0.9% Arab (0.6%)
- 9.3% White Irish or White other (8%)

Sexual orientation

### Religion

55.3% of people have no religion or belief (37%):

- 30.9% Christian (46%) 0.8% Hindu (1.8%)
- 2.9% Muslim (6.7%) 0.1% Sikh (0.9%)
- 0.8% Jewish (0.5%) • 0.8% Other religion
- 0.7% Buddhist (0.5% (0.6%)

### Pregnancy & maternity

There were 668 live births in 2021<sup>2</sup>

#### Sex

Female 51.6% (51%)

Male 48.4% (49%)

### Language

For 7% of people, English is not their main language (9%)

0.7% do not speak English well (1.6%)

## **Disability**

17.7% of residents are disabled under the Equality Act (17%)

### **Veterans**

2.3% of people aged 16+ stated on the 2021 Census that they had previously served in the armed forces (3.8%)

### Marriage / civil partnership

36.6% of people aged 16+ are married or in a civil partnership (45%)

- 49.8% Never married/civil partnership (38%)
- 1.8% Separated (2%)
- 7.6% divorced/civil partnership dissolved (9%) 4.2% widowed / surviving civil partnership
- partner (6%)

#### Carers

8.1% of people provide unpaid care (9%)

England figure in brackets

Source: Census 2021 unless otherwise stated

- 1 Department for Education, 2 ONS
- \* Non White UK/British

UTLA: Only available at UTLA level

UTLA: Upper tier local authority

# Current population & change over the last 10 years

## In Brighton & Hove North ICT:

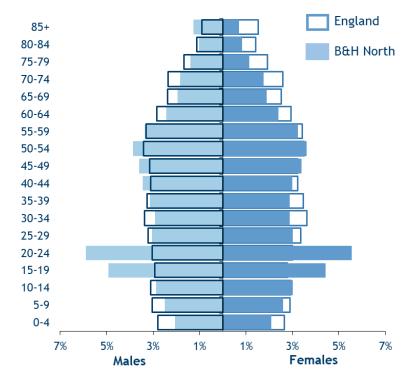
- There are relatively fewer young children aged 0-9 years than for England
- There are a disproportionate number of people aged 15-24 years
- There are relatively fewer people from the ages of 60 years

### Between 2011 and 2021:

- The total population has increased by 1.3%, lower than England (6.6%)
- The largest % increase was in 50-59 year olds, which has increased by 3,251 (35.1%) since 2011
- There were decreases in children aged 0-9 years and in adults aged 30-49 and 80+ years

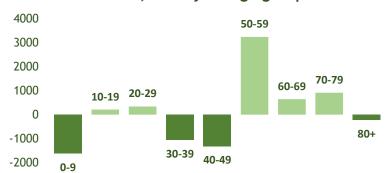
## Total population 88,941





## Increase in population 1,172

### Brighton and Hove North change in population between 2011 and 2021 Census, in 10 year age groups



	2021	2011	B&H North		England
	2021		change	%	%
0-19	21,783	23,185	-1,402	-6.0%	2.7%
20-64	54,858	53,454	1,404	2.6%	4.4%
65+	12,300	11,130	1,170	10.5%	20.1%
All ages	88,941	87,769	1,172	1.3%	6.6%

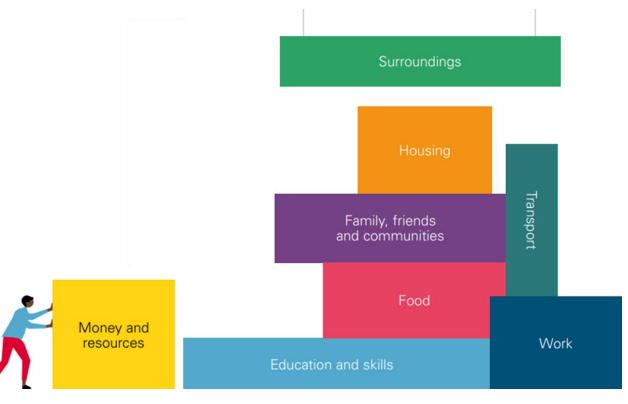
# How is the population expected to change over the next ten years?

## PLACEHOLDER SLIDE

Please note – population projections rebased for 2021 Census will not be published until 2025

# The building blocks of Health

- When we don't have the things we need, like warm homes and healthy food, and are constantly worrying about making ends meet, it puts a strain on our physical and mental health. This results in poorer physical and mental health, earlier onset of conditions and earlier death.
- Almost every aspect of our lives impacts our health and ultimately how long we will live – our jobs and homes, access to education and public transport and whether we experience poverty or discrimination. These are the building blocks of health.
- To create a city where everybody can thrive, we need all of the right building blocks in place:



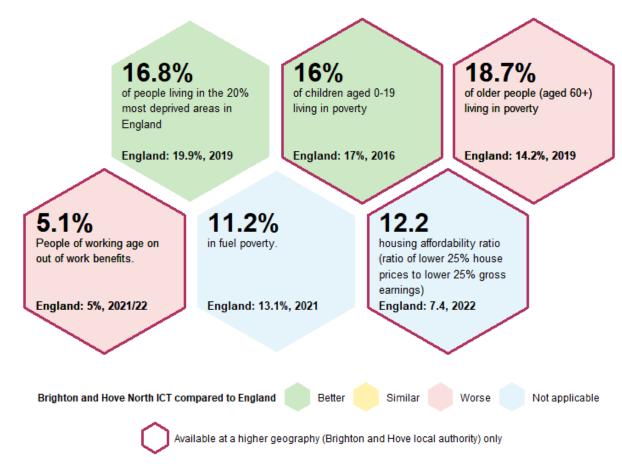
Source: How to talk about the building blocks of health - The Health Foundation

# **Building blocks of health in Brighton & Hove North ICT**

Overall in Brighton & Hove North ICT, there are relatively fewer people living in more deprived areas than England and less fuel poverty.

Across Brighton & Hove, there are fewer children living in poverty than England, but relatively more people are on out of work benefits and more older people live in poverty than England.

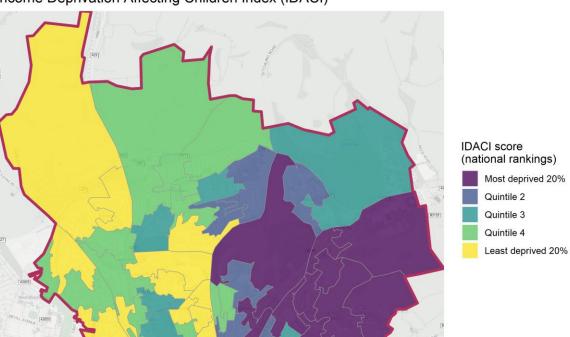
Housing cost is a significant issue in Brighton & Hove – with those on the lowest 25% of earnings requiring 12.2 times their earning to afford the lowest 25% of housing prices, compared to 7.4 times across England.



# **Building blocks in Brighton & Hove North ICT**

Income deprivation is defined as receiving Income Support or income-based Jobseekers Allowance or income-based Employment and Support Allowance or Pension Credit (Guarantee) or Universal Credit (in the 'Searching for work', 'No work requirements', 'Planning for work', 'Working – with requirements' and 'Preparing for work' conditionality groups) or families not in receipt of these benefits but in receipt of Working Tax Credit or Child Tax Credit with an equivalised income (excluding housing benefit) below 60 per cent of the national median before housing costs

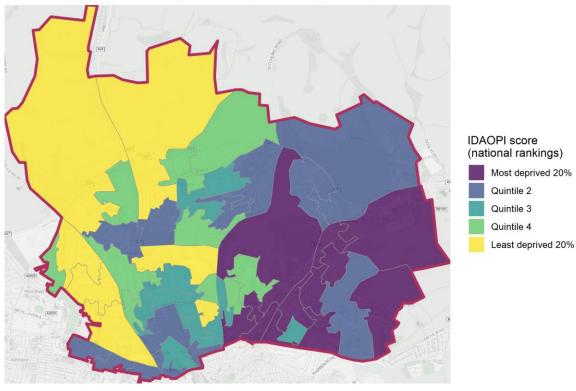
Income Deprivation Affecting Children Index (IDACI)



LSOA (2011) based boundaries. © Stadia Maps; © OpenStreetMap contributors

In Brighton & Hove North ICT, 11 of its 52 neighbourhoods had an IDACI score (proportion of 0-15s living in income deprived families) in the top 20% most deprived neighbourhoods in the country. The highest score in a neighbourhood locally was 45.4% or almost half of children experiencing income deprivation.

Income Deprivation Affecting Older People Index (IDAOPI)



LSOA (2011) based boundaries.
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There were 13 neighbourhoods in the Brighton & Hove North ICT with an IDAOPI score (proportion of 60+ year olds living experiencing income deprivation) in the top 20% most deprived neighbourhoods in the country. The highest score in a neighbourhood locally was 44.3% or almost half of older people.

## Building blocks of health in **Brighton & Hove North ICT**

Brighton & Hove North ICT is more densely populated than England.

More households are privately rented, at almost 1 in 4 households.

1 in 10 households are made up of lone parents, higher than England.

The population is relatively more educated (the ICT has the lowest percentage of people age 16+ with no qualifications of any Sussex ICT).

Relatively fewer people of working age are in employment than England, but this is related to higher numbers of students in the ICT.

The overall crime rate, violent crime rate and anti-social behaviour incident rate are all lower than England.

34.021 one resident

England: 23,436,090, 2021

16.3% of households comprise a person aged under 66 living

England: 17.3%, 2021

10.6% of households comprise a person aged 66+ living alone

England: 12.8%, 2021

10.5% of households comprise a lone parent

England: 6.9%, 2021

2,639

(population density)

England: 434, 2021

4.2%

overcrowded

England: 4.4%, 2021

1.3%

of households lack central heating

England: 1.5%, 2021

24.3%

of households are privately renting (main type)

England: 18.2%, 2021

65.9%

of reception age children achieving a good level of development

England: 65.2%, 2021/22

51.7

Average Attainment 8 score at age 16

England: 48.7, 2021/22

16.3

Average Attainment 8 score for children in care

England: 20.3, 2021/22

10%

of people aged 16+ with no qualifications

England: 18.1%, 2021

54.7%

of people of working age in employment

England: 55.7%, 2021

48.6

overall crime rate per 1.000 in the 12 months to July 2023

England: 88.2, 2023

18.4

violent crime rate per 1,000 in the 12 months to July 2023

England: 30.5, 2023

5.4

antisocial behaviour incident rate per 1,000 in the 12 months to July 2023

England: 13.7, 2023

Brighton and Hove North ICT Compared to England



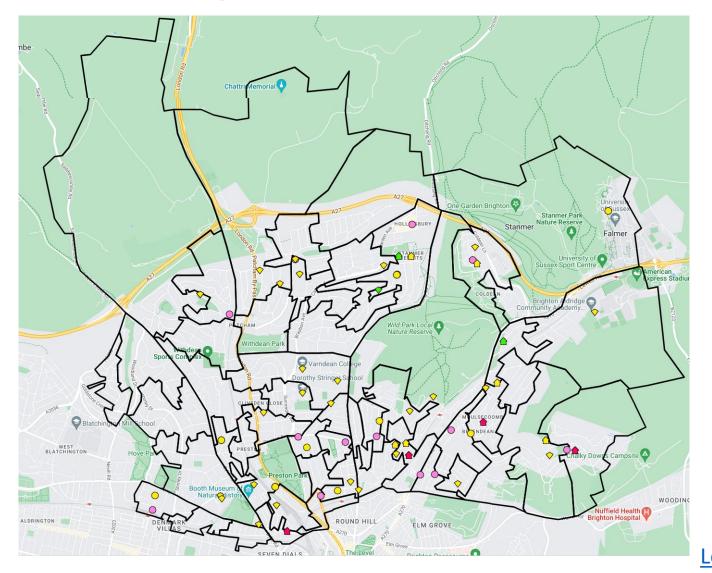
Similar

Not applicable



Available at a higher geography (Brighton and Hove local authority) only

# Services within Brighton & Hove North ICT



#### SERVICE TYPES

- Nursing or care home
- GP practice
- Pharmacy
- Hospital
- School or college
- Libraries
- Low cost and community meal projects
- 🛖 Low cost and free community shopping
- Food Bank

<u>Local Insight (communityinsight.org)</u>

## Sussex Integrated Community Team Profiles - Health & Wellbeing across the life course

## Brighton and Hove North Integrated Community Team For B&H North ICT

Whilst some issues affect people of all ages, outcomes have been placed in the life stage where the impact may be greatest.

and are compared with England





Similar



















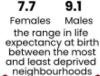












Children aged 0-19 living in poverty 2016

16%

82 of 0-18 year olds in ćare per 10,000 2022

5.8% of women smoking at the time of delivery 2021/22

72.3% of women breast fed at 6-8 weeks after birth 2019/20

83.4% of those aged <5 years had two doses of MMR vaccine 2021/22

65.9% of reception age children achieving a good level of development 2021/22

68.2% 51.7 of children average in year 6 Attainement aré a healthy 8 score at weight 2021/22 2021/22

























1.4% 9.6%

Depression COPD Hypertension recorded prevalence in primary care (GP) records 2021/22

46.6%

of at risk people aged <64 years receive flu vaccination 2022/23

28.5%

of people report a high level of anxiety 2021/22

12.8% of adults aged 18+ are current

smokers

2022

12.4

of adults aged 19+ are physically active 2021/22

72.7%

19.1% of adults aged 18+ hospital classified admissions as obese per 100,000 2021/22 2021/22

420.3 alcohol specific

2021

54.7%

of people of working age in employment



715

3.8%

self-harm per 100,000 aged 10-24 years 2021/22

hospital

admissions for

of 16-17 year olds not in education. employment, or training 2021



262.1

hospiťal

2021/22

emergency

admissions

per 100,000

for self-harm



79.8

diseases

Cardiovascular Cancer



133.7

Preamature (under 75s) mortality

rate per 100,000 population

2021



25

Respiratory

diseases



drug related

per 100,000

population

2018-20

10.9

deaths





suicide and

aged 10+

2019-21

undertermined

100,000 people

injury deaths per





1

10.6% comprising

18.7% of people aged 60+ living in poverty 2019

66+ living alone 2021

66.8%

of households of those aged 65+ estimated to a person aged have dementia who have recevied a diagnosis 2021

17.9 21 Females Males Life expectancy at age 65 (years) 2021







36.5% 29.4%

hospital care home

of deaths occuring



0.3% of patients on palliative/ end of life care

2021/22

list in GP records

Dying well 32.3%

՛ല

of carers who report having as much social contact as they would like 2021/22

37.5%

՛€

of adult social care clients aged 65+ who report having as much social contact as they would like 2021/22

75.1% of people aged 65+ vears receive flu vaccination 2022/23

438.3 admissions to residential or nursina homes per 100,000 population aged 65+ 2021/22

11.6

care home beds per 100 people aged 75+ 2021

2,621

emergency hospital admissions for falls per 100,000 population aged 65+ 2021/22



Available only at a higher geography (Brighton and Hove local authority)



Available only for registered population (e.g. CCG or Sub-ICB geography)

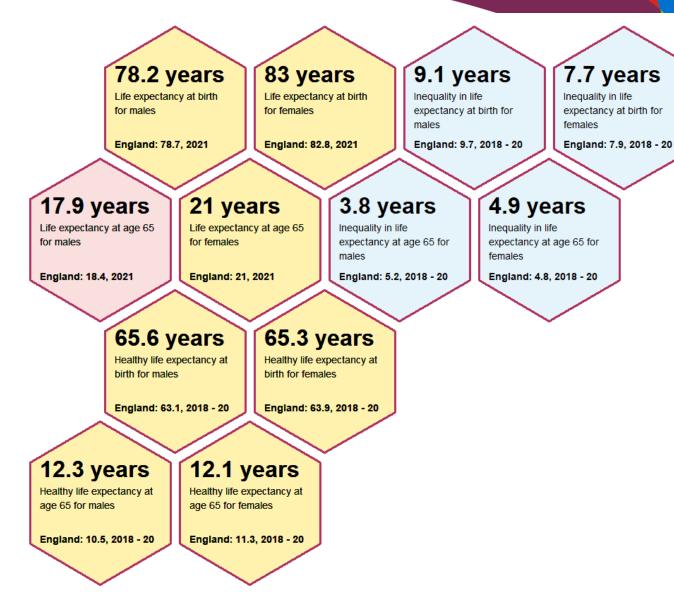
# Life expectancy and inequalities – Brighton and Hove

Life expectancy and healthy life expectancy figures are only available for the whole of Brighton & Hove.

Life expectancy at birth in Brighton & Hove, for both males and females, is similar to England.

There is a gap of 9.1 years for men in life expectancy in Brighton & Hove (England 9.7 years) and 7.7 for women (England 7.9 years).

Life expectancy at age 65 for males in Brighton & Hove is significantly lower for males than for England. For females it is the same as England.



Brighton and Hove North ICT compared to England

Better

Similar

# Main causes contributing to the gap in life expectancy – Brighton & Hove

These figures are only available for the whole of Brighton & Hove.

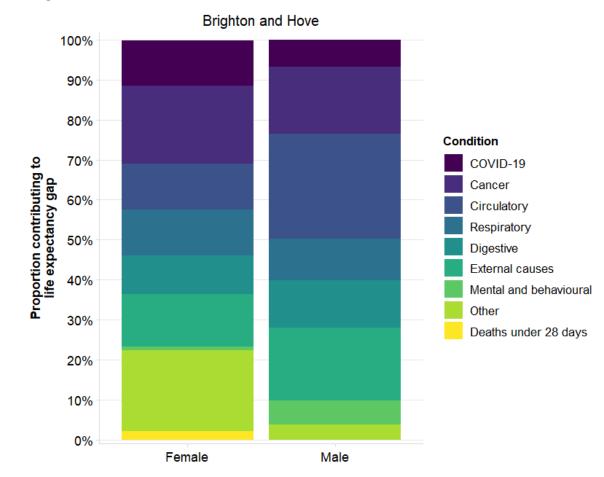
The causes of death which contribute the most to inequalities in life expectancy in Brighton & Hove are:

- For males circulatory, external causes (injury, poisoning and suicide) and cancer
- For females cancer, external causes, circulatory and respiratory diseases
- The contribution of external causes and digestives diseases (includes alcohol-related conditions, chronic liver disease, cirrhosis) is greater in Brighton & Hove than across England

Source: Segment Tool (phe.gov.uk)

Causes of death contributing most to inequalities in life expectancy between the most and least deprived quintiles (20%) of each area.

Brighton and Hove; data for 2020 and 2021 combined.



Data for lower tier local authorities has been included for 2014 to 2016 and 2017 to 2019, but have not been included for 2020 to 2021 as the breakdowns based on 2 years of data are not robust due to small numbers.

# Key risk factors and greatest burden of disease – Brighton & Hove

If we want to improve population health, we need to understand what the risk factors are for Brighton & Hove's population and whether, and how, we can modify them. These figures are only available for the whole of Brighton & Hove.

#### Top 20 causes of the greatest burden of ill health



#### Top 20 risk factors

1 Smoking
2 High body-mass index
3 High fasting plasma glucose
4 Alcohol use
5 High blood pressure
6 Drug use
7 High LDL
8 Low temperature
9 Low whole grains
- 10 Occupational carcinogens
11 Kidney dysfunction
12 Particulate matter
13 Low physical activity
14 Occupational ergonomic
15 High processed meat
16 Low bone mineral density
17 High red meat
18 Secondhand smoke
19 Low fruit
- 20 Low birth weight & short gestation
Metabolic risks Environmental/occupational risks
Behavioral risks

To improve life expectancy, healthy life expectancy, inequalities in both life expectancy and healthy life expectancy:

- •Tackle major behavioural risks tobacco, diet, exercise, alcohol and drugs
- Diabetes is a rising concern
- •CVD reduction including controlling blood pressure key and has considerable population impact
- •Cancer major cause of ill health, importance of behaviours and screening
- Mental health
- •Immunisation
- Air quality and cold homes

In addition, for healthy life expectancy and inequalities in healthy life expectancy tackle:

- •MSK and pain management
- Sensory impairment

Source: Global Burden of Disease Visualisations: Compare (thelancet.com)

# Starting well in life in Brighton & Hove North ICT

3.8%

not in education.

employment, or training

(NEET) aged 16-17 years

England: 5.2%, 2022/23

Many of these figures are only available for the whole of Brighton & Hove.

Brighton & Hove does well in some areas for infants and very young children: fewer mothers smoke; more breastfeed; more children meet expected levels of communication skills at age 2-2.5 years.

However, MMR immunisation uptake is worse than England.

Brighton & Hove has significantly higher rates of smoking, drinking and drugs use in young people and poorer emotional wellbeing impacting young people's current & future wellbeing.

Hospital admissions for self-harm are worse than England in Brighton & Hove North ICT.

6.7% 2.6% of at term births (37+ week rate of infant mortality of women smoking at the rate of premature births per 1,000 live births time of delivery of their (<37 week gestation) per gestation) which are a low 1.000 live births birthweight (<2.5kg) England: 78, 2019 - 21 England: 2.8%, 2021 England: 3.9, 2019 - 21 England: 8.8%, 2022/23 72.3%\* 84.4% 90.1% 17.4%\* 68.2% of women breastfeeding at of children aged 5 years of children aged 2-2.5 of children aged 5 years of children in year 6 who 6-8 weeks after birth. completing two doses of the years achieving expected with visually obvious are a healthy weight communication skills Measles, Mumps, Rubella dentinal decay. (MMR) vaccine England: 85.3%, 2022/23 England: 48%\*. 2019/20 England: 84.5%, 2022/23 England: 23.3%\*. 2016/17 England: 61.9%, 2022/23 76% 119 106.6 715 rate of hospital admissions rate of hospital admissions care leavers aged 17-18 in rate of hospital admissions for self-harm per 100,000 education, employment, or for unintentional and for asthma per 100,000 training deliberate harm per 10,000 population aged 0-19 years aged 10-24 years aged 0-4 England: 66%, 2021/22 England: 103.6, 2021/22 England: 131.5, 2021/22 England: 427.3, 2021/22

Brighton and Hove North ICT compared to England

Better Similar Worse Not applicable

Available at a higher geography (Brighton and Hove local authority) only

<sup>\*</sup> Note: due to data quality issues for these indicators in recent years, data are shown for an older time period than is currently available for higher geographies (e.g. regionally and nationally)

Living well in Brighton & Hove North ICT

Most of these figures are only currently available for the whole of Brighton & Hove. The 2024 Health Counts survey will provide information at ICT level around some of these indicators.

Brighton & Hove has significantly better rates of physical activity, walking and cycling, and obesity in adults.

However, relatively more adults have a high anxiety score, more adults drink above recommended level. In Brighton & Hove North ICT the rate of alcohol specific admissions to hospital is significantly lower than for England.

Immunisation rates are low across most adult immunisation programmes for Brighton & Hove.

98.6

Health Index Score

England: 100.8, 2021

5.3%

proportion of deaths (mortality) attributable to air pollution

England: 5.5%, 2021

420.3

alcohol specific emergency hospital admissions rate per 100,000 population

England: 626.1, 2021/22

40.7%

of adults drinking more than 14 units of alcohol per week

England: 22.8%, 2015 - 18

19.1%

of adults aged 18 and over classified as obese

England: 25.9%, 2021/22

72.7%

of adults aged 19 and over who are physically active

England: 67.3%, 2021/22

18.3%

of adults aged 19 and over who are physically inactive

England: 22.3%, 2021/22

33.4%

of adults aged 16 and over who walk for travel at least three days per week

England: 15.1%, 2019/20

5.2%

of adults aged 16 and over who cycle for travel at least three days per week

England: 2.3%, 2019/20

12.8%

smoking prevalence among those aged 18+ years

England: 12.7%, 2022

9.6%\*

Hypertension prevalence (recorded in primary care, QOF)

England: 14%\*, 2021/22

1.4%\*

COPD prevalence (recorded in primary care, QOF)

England: 1.9%\*, 2021/22

12.9%\*

Depression prevalence (recorded in primary care, QOF)

England: 12.7%\*, 2021/22

8.4%

of people with a low happiness score

England: 8.4%, 2021/22

28.5%

of people with a high anxiety score

England: 22.6%, 2021/22

75.1%

of those aged 65 and over receiving flu immunisation

England: 79.9%, 2022/23

46.6%

of at risk individuals aged <65 receiving flu immunisation

England: 49.1%, 2022/23

64.2%

of people receiving vaccination for pneumococcal infection

England: 70.6%, 2020/21

70.4%

aged 75+ taking up the COVID-19 spring booster

England: 69.5%, as at 15th Nov 2023 62%

HPV coverage (2 doses) among females aged 13-14

England: 67.3%, 2021/22

56.7%

HPV coverage (2 doses) among males aged 13-14

England: 62.4%, 2021/22

Brighton and Hove North ICT compared to England



r



Worse

Not applicable

Living well in Brighton & Hove North ICT

Brighton & Hove North ICT has significantly worse rates of emergency admissions for self-harm than England.

The ICT does not have higher rates of premature mortality for cardiovascular diseases, respiratory diseases or cancer than England.

Many of these figures are only currently available for the whole of Brighton & Hove.

Across Brighton & Hove there are worse rates of:

- Drug related deaths
- Cancer screening coverage and adults with serious mental illness taking up a physical health check.

However, there are relatively fewer emergency admissions for COPD, pneumonia and asthma for adults in Brighton & Hove than for England. And relatively more people take up an NHS Health Check.

**79.8** premature (under 75s) mortality rate for cardiovascular diseases per 100,000 population England: 76, 2021

for breast cancer England: 65.2, 2022

262.1

emergency hospital

admissions for self-harm

England: 163.9, 2021/22

rate per 100,000 population

25 premature (under 75s) mortality rate for respiratory diseases per 100,000 population England: 26.5, 2021

133.7 premature (under 75s) mortality rate for cancer per 100,000 population England: 121.5, 2021

433.7 excess premature (under 75s) mortality among adults with serious mental illness England: 389.9, 2018 - 20

10.9 rate of drug related deaths per 100,000 population England: 5, 2018 - 20

12.4 rate of suicide and undetermined injury deaths per 100,000 population aged 10 years and over England: 10.4, 2019 - 21

208.5 emergency hospital admissions for pneumonia rate per 100,000 population

England: 241.7, 2020/21

34.5 emergency hospital admissions for asthma in adults per 100,000 population England: 44.4, 2020/21

Cancer screening coverage for cervical cancer among those aged 25-49 years

271.2 emergency hospital

35+ years

admissions for COPD rate

England: 415.1, 2019/20

per 100,000 population aged

England: 67.6%, 2022

of people taking up an NHS Health Check following invitation

England: 7.2%, 2022/23

33.4% of adults with learning disability taking up health check following invitation

England: 51.9%, 2020

36.1% of adults with serious mental illness taking up a physical health check

England: 58.5%, 2022/23

Cancer screening coverage

61.2%

68.8 Cancer screening coverage for bowel cancer

England: 70.3, 2022

50.7% of cancers diagnosed at stage 1 or 2

England: 52.3%, 2020

53.8 of new cancer diagnoses through the Two Week Wait pathway.

England: 54.4, 2021/22

Brighton and Hove North ICT compared to England



Not applicable

Available at a higher geography (Brighton and Hove local authority) only

Indicators are published at primary care or other organisation level (NHS Brighton And Hove CCG and Sussex ICB - 09D) representing registered patients rather than residents

Ageing well – Brighton & Hove North ICT

Within Brighton & Hove North ICT there is a significantly higher rate of emergency hospital admissions for falls, as is the case for many ICTs in Sussex.

Many of these figures are only available for the whole of Brighton & Hove.

### In Brighton & Hove:

- Relatively fewer people aged 65+ are still at home 91 days after discharge than for England.
- More carers said that they had as much social contact as they would like
- There are relatively more adults aged 65 or over receiving any adult social care long term support than England

66.8 of people aged 65+ estimated to have dementia who have received a diagnosis England: 63, 2023

2.621 emergency hospital admissions for falls rate per 100,000 population aged

England: 2,099.9, 2021/22

66.1%

of people aged 65+ still at home 91 days after a discharge from hospital

England: 81.8%, 2021/22

**11.6** 

Care home beds per 100 people aged 75+ years

England: 9.4, 2021

438.3

Permanent admissions to residential or nursing homes per 100,000 population aged 65+ years England: 538.5, 2021/22

34.5

Estimated number of self-funding care home

England: 37, 2022/23

1.179\*

of adult social care clients (aged 65+) receiving long term nursing support per 100,000 population

England: 1,271\*, 2021/22

243\*

of adult social care clients (aged 65+) receiving long term residential support per 100,000 population England: 316\*, 2021/22

2,935\*

of adult social care clients (aged 65+) receiving long term community support per 100,000 population England: 2,838\*, 2021/22

5.490

of adult social care clients (aged 65+) receiving any long term support per 100,000 population

**37.5%** 

of adult social care clients aged 65+ who report as much social contact as they would like England: 40.6%, 2021/22

**32.3%** 

of carers who had as much social contact as they would like

England: 28%, 2021/22

England: 5,055, 2021/22

Brighton and Hove North ICT compared to England



Better

Similar

Not applicable



Available at a higher geography (Brighton and Hove local authority) only

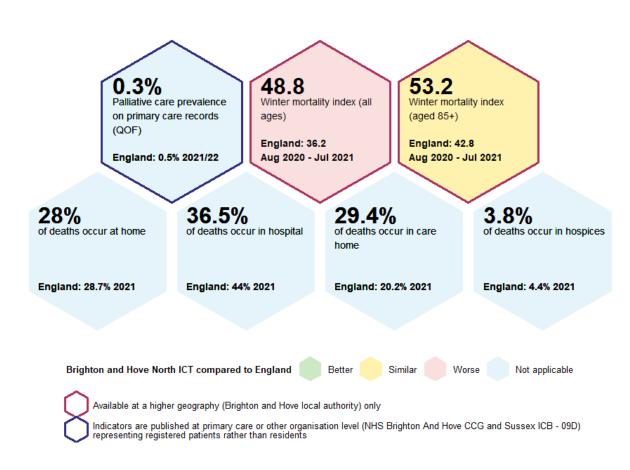
\* Note: rates have been calculated on rounded values and may not match outputs published elsewhere exactly

# **Dying well in Brighton & Hove North ICT**

There are a limited set of indicators available around dying well.

Within Brighton & Hove North ICT in 2021, a similar proportion of deaths occurred at home than for England, with a lower proportion in hospital and a higher proportion in a care home when compared with England. The Covid19 pandemic affected the place of death figures in 2021.

Some of these figures are only available for the whole of Brighton & Hove. In Brighton & Hove there is a higher winter mortality index than for England.



# **GP Primary Care in Brighton & Hove North ICT**

- Within Brighton & Hove North ICT there is 1 full PCN and 2 partial PCNs with 9 GP Practices with very varying levels of population
  - 2 GP practices (Stanford & Uni of Sussex) have a population greater than 15k
  - 1 GP practice (Haven) have a population below 5k
- There has been a fall in the registered population in the last year
- There are more patients per GP, nurse or DPC than the Sussex average
- The average patient survey practice experience is worse than Sussex
- The Average QOF Achievement score is lower in than the Sussex average
- Annual Dementia Care plans are below the 75% target but higher than the Sussex average
- The percentage of people with Learning disabilities Key who had a health check is lower than the Sussex average
- The number of people with Diabetes who have completed the 8 core processes, and all 3 treatment targets is lower than the Sussex average

-2.4% Registered population change in

last 12months Sx: +0.7%

9x Good

**GP Practices Overall CQC** Rating

Per GP FTE Less Trainees Sx: 2.343

Patients (Weighted)

2,475

1,285

Patients (Weighted) Per GP & Nurse & DPC FTF Sx: 955

69%

Av. Patient Survey Overall Practice Experience - Good Sx: 74.1%

81.9

Av. QOF % (Score Overall)

Sx: 92.5%

8.5

Av. OOF PCA Adjustment Rate % (Score Overall) Sx: 7.8

71.9%

Dementia Annual Care Plans % (target 75%) Sx: 64.6%

58.5%

**Learning Disabilities** Health Checks Rolling 12m

Sx: 74.7%

40.8%

Diabetes NDA Type 2 **8 Core Processes** 

Sx: 53.3%

26.7%

Diabetes NDA Type 2 All 3 Treatment **Targets** Sx: 33.5%

77.7%

Flu Vaccination 65+

Sx: 81.3%

Better than Sussex Average

At Sussex Average

Worse than Sussex Average

In the lowest number quartile for Sussex In the inter-quartile period for Sussex

In the highest quartile for Sussex

No comparison made

(lowest or highest quartile does not mean good or bad)

356

GP Referrals 12m (OP Proxy) Per 1000 Weighted Population Sx: 379

185

**A&E Attendances** 12m Per 1000 Weighted Population

Sx: 208

# Long term Conditions : QOF registers – Brighton & Hove North ICT

 Brighton & Hove North ICT has lower QOF prevalence than the Sussex average for all long-term conditions presented, except for mental health (which is similar to Sussex)

4.73%

Asthma Prevalence % of 6+ population

Sx: 6.79%

1.04%

COPD Prevalence % of total population

Sx: 1.89%

1.34%

Atrial Fibrillation
Prevalence
% of total population
Sx: 3.17%

1.67%

Coronary Heart
Disease Prevalence
% of total population
Sx: 3.31%

1.04%

Stroke Prevalence % of total population

Sx: 2.11%

0.44%

Heart Failure
Prevalence
% of total population
Sx: 0.95%

4.46%

Obesity Prevalence % over 18 population

Sx: 8.29%

3.59%

Diabetes Prevalence % over 17 population

Sx: 6.85%

2.29%

Cancer Prevalence % of total population

Sx: 4.06%

2.51%

Chronic Kidney
Disease Prevalence
% of >18 population
Sx: 4.71%

0.27%

Palliative Prevalence % of total population

Sx: 0.49%

0.47%

Dementia Prevalence % of total population

Sx: 0.92%

Key

Better than Sussex Average

At Sussex Average

Worse than Sussex Average

In the lowest number quartile for Sussex

In the inter-quartile period for Sussex
In the highest quartile for Sussex

No comparison made

(lowest or highest quartile does not mean good or bad)

11.50%

Depression Prevalence % of >18 population **Sx: 13.74**% 0.50%

Learning Difficulties Prevalence % of >18 population **Sx: 0.58%**  0.90%

Mental Health
Prevalence
% of total population
Sx: 1.07%

7.99%

Other Hypertension
Prevalence
% of total population
Sx: 14.98

# Primary Care 2 – Brighton & Hove North ICT

- Brighton & Hove North ICT has lower immunisation uptake for:
  - Covid booster
  - 65+ Flu
  - At risk under 50 flu

75.6%

Covid Booster uptake 22/23

Sx: 84%

77.7%

65+ flu vaccination rate

Sx: 81.3%

36.1%

Flu vacc rate, 6m to under 50 at risk

Sx: 38.5%

## Key

- Better than Sussex Average
- At Sussex Average
- Worse than Sussex Average
- In the lowest number quartile for Sussex
- In the inter-quartile period for Sussex
- In the highest quartile for Sussex
- No comparison made

(lowest or highest quartile does not mean good or bad)

# Mental Health – Brighton & Hove

- Brighton & Hove has a lower recovery rate from Talking Therapies than the Sussex average
- Dementia Care planning, support are higher than the Sussex average
- Diagnosis rate against the expected level are higher than the Sussex average
- Brighton and Hove has a higher proportion of adult mental health admissions in which there was no prior contact with services
- A slightly lower proportion of mental health adult discharges were followed up within 72 hours
- Access rate to specialist perinatal care is lower than the Sussex average

Figures are only available at East Sussex, West Sussex and Brighton Areas

6.415

**NHS Talking Therapies** Access rate (22-23)Sx: 38,072

45.2%

**NHS Talking Therapies** recovery rate (Av Apr-Aug 23) Sx: 51.0%

67.4%

EIP: % of people starting treatment within 2 wks (22-23)Sx: 67.7%

69.1%

Dementia Care Planning and Post Diagnostic Support (Av Apr-Aug 23) Sx: 66.4%

68.1%

**Dementia Diagnosis** Rate (Av Apr-Aug 23) Sx: 63%

14.0%

**Adult MH Admissions** with no prior contact (22-23)Sx: 5.7%

82.9%

**Adult Discharges** followed up within 72 hrs (Av Oct22-Jun23) Sx: 88.3%

33,405

Community Mental Health Access rate (2+ contacts) (Jul22-Jun23)

Sx: 45,890

1,462

Physical Health Checks for people with SMI (YTD Jun-23) Sx: 7,166

35.675

**CYP Access** (1+ contact) (22-23)

Sx: 237.410

3.920

**CYP Access** 18-25 vr olds (22-23)

Sx: 15.741

1,098

Learning Disability Registers and AHCs delivered by GPs (22-23)

Sx: xx

Key

Better than Sussex Average

At Sussex Average

Worse than Sussex Average

In the lowest number quartile for Sussex

In the inter-quartile period for Sussex

In the highest quartile for Sussex

No comparison made

(lowest or highest quartile does not mean good or bad)

250

Perinatal mental health: Access rate to specialist Perinatal MH (22-23)

Sx: 780

8.7%

Perinatal mental health: Access rate to specialist Perinatal MH (YTD 23)

Sx: 10.0%

# Planned Care Alternatives and Cancer Care – Brighton & Hove North ICT

- Brighton & Hove North ICT has:
  - A lower proportion of 2week rule referrals which result in a Cancer diagnosis
  - A low rate of new cancer diagnoses
- The four Brighton & Hove ICTs have the four lowest rates of 2-week rule referrals which result in a cancer diagnosis

**17.0**Advice and Guidance Referrals per 1,000 population in 22/23

Sussex: 19.3

5.7%

Patient initiated DNA rate in 22/23

**Sussex: 5.1%** 

304.7

New cancer cases (per 100k population)

England: 456

98.2

2wk wait referrals (5yr indirectly age-sex standardised referral ratio)

England: 100

5.73%

2wk referrals resulting in a diagnosis of cancer

England: 6.8%

### Key

- Better than Sussex Average
- At Sussex Average
- Worse than Sussex Average
- In the lowest number quartile for Sussex
- In the inter-quartile period for Sussex
- In the highest quartile for Sussex
- No comparison made

(lowest or highest quartile does not mean good or bad)

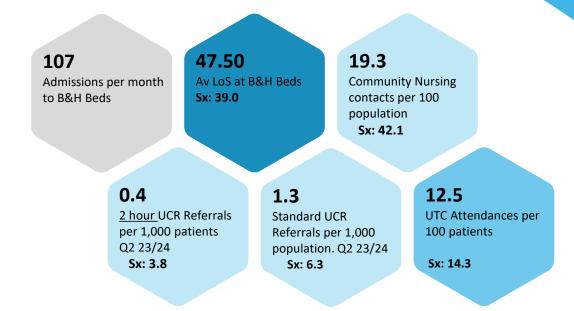
53.7%

Lower GI Suspected Cancer referrals with a FIT result, 23/24

Sussex: 53.9%

# Community Health Services – Brighton & Hove North ICT

- Brighton Community Beds have the highest length of stay of community beds in Sussex
- Brighton & Hove ICTs all had a significantly low rate of both 2 hour and standard Urgent Community Response
- Brighton & Hove North ICT also has a lower rate of community nursing contacts than the Sussex average



Figures above are for the full year 22/23 unless stated otherwise

## Key

- Better than Sussex Average
- At Sussex Average
- Worse than Sussex Average
- In the lowest number quartile for Sussex
- In the inter-quartile period for Sussex
- In the highest quartile for Sussex
  - No comparison made

(lowest or highest quartile does not mean good or bad)

# Acute Planned Care – Brighton & Hove North ICT

- Key Hospital Sites in Brighton have a significantly higher level of patients waiting both over 52 weeks and 65 weeks for Elective Acute care
- Brighton & Hove North ICT has lower rates, compared to Sussex average for:
  - New outpatient appointments
  - Follow up outpatient appointments
  - Outpatient procedures
  - Daycase inpatient admissions
  - Overnight inpatient admissions

37,084

Total RTT Waiting List for all patients at RSxCH 5,254 (14.2%)

Patients waiting 52+ weeks for all patients at RSxCH

Sussex: 9.4%

2,025 (5.5%)

Patients waiting 65+ weeks for all patients at RSxCH

Sussex: 2.8%

16,007

Total RTT Waiting List for all patients at other Brighton UHSx sites 1,949 (12.2%)

Patients waiting 52+ weeks for all patients at other Brighton UHSx sites

Sussex: 9.4%

636 (4.0%)

Patients waiting 65+ weeks for all patients at other Brighton UHSx sites

Sussex: 2.8%

82.93

New Outpatient Appointments (per 100 population) Sussex: 124-56 195.67

Follow Up Outpatient Appointments (per 100 population)

Sussex: 271.98

51.07

Outpatient Procedures (per 100 population)

Sussex: 78.38

## Key

Better than Sussex Average

At Sussex Average

Worse than Sussex Average

In the lowest number quartile for Sussex

In the inter-quartile period for Sussex

In the highest quartile for Sussex

No comparison made

(lowest or highest quartile does not mean good or bad)

18.97

Daycase Inpatient Admissions (per 100 population)

Sussex: 27.49

1.58

Overnight Inpatient Admissions (per 100 population)

Sussex: 2.00

32:12:1

Ratio of Outpatient:
Daycase: Overnight
Procedures
(of available activity types)

Sussex: 39:14:1

Figures above are for the full year 22/23 unless stated otherwise

# **Urgent and Emergency Care – Brighton & Hove North ICT**

- The rates for the following are all lower in Brighton & Hove North ICT than the Sussex average:
  - 111 calls
  - Same day urgent care A&E attendance rates
  - A&E attendance rate
  - Percentage of A&E attendences subsequently admitted
  - Emergency admission
  - Emergency admission for Ambulatory Care Sensitive conditions
- The percentage of emergency admissions which came via A&E is higher than the Sussex average

**66.16**111 Calls per 1,000 population

Sx: 98.12

45.88

999 Calls per 1,000 population (Former BHC geography only)

Sx: 48.27

Sx: 43.35

11.17

Same Day Urgent Care A&E Attendances rate /100 pop

Sx: 15.36

27.11

A&E Attendance rate per 100 population

Sx: 37.95

17.2%

Of A&E Attendances were subsequently Admitted

Sx: 20.0%

5.10

Emergency Admission rate per 100 population

Sx: 9.35

88.1%

Of Emergency Admissions came via A&E

Sx: 80.8%

6.90

40.74

only)

**Ambulance Mobilisations** 

(Former BHC geography

per 1,000 population

Emergency Admissions Ambulatory Care Sensitive Conditions per 1,000 pop

Sx: 13.21

Key

Better than Sussex Average

At Sussex Average

Worse than Sussex Average

In the lowest number quartile for Sussex

In the inter-quartile period for Sussex

In the highest quartile for Sussex

No comparison made

(lowest or highest quartile does not mean good or bad)

Figures above are for the full year 22/23

# Acute Inpatient Emergency Care – Brighton & Hove North ICT

- The emergency admission rate and the rate of acute beds occupied by Brighton & Hove North ICT patients is lower than the Sussex average
- Emergency admission rates with lengths of stay of 14 days or more, or 21 days or more is lower in Brighton & Hove North ICT than the Sussex average

91 9.27 5.10 **Emergency Admission** Average Acute Beds Average Acute Beds Occupied per 10,000 rate per 100 Occupied population population Sx: 9.35 Sx: 16.8 6.64 61.93 50 Average Nights in Em. Admissions with a **Emergency** 

### Key

- Better than Sussex Average
  - At Sussex Average
- Worse than Sussex Average
- In the lowest number quartile for Sussex

Hospital for

Sx: 6.58

EmergencyAdmissions

- In the inter-quartile period for Sussex
- In the highest quartile for Sussex
- No comparison made

(lowest or highest quartile does not mean good or bad)

33

Admissions with a LoS

>=14 days per month

Emergency
Admissions with a LoS
>=21 days per month

40.13

LoS >=14 days

per 10,000 pop

Sx: 131.10

Em.Admissions with a LoS >=21 days per 10,000 pop **Sx: 131.10** 

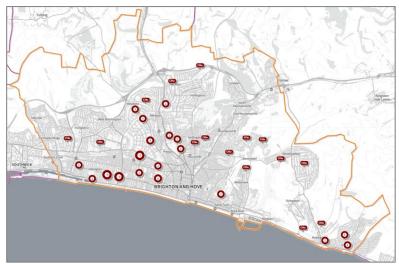
Figures above are for the full year 22/23 unless stated otherwise

# Care Homes: Urgent Healthcare use – Brighton & Hove North ICT

- Brighton & Hove North ICT is lower than Sussex average for:
  - The proportion of 999 calls from Care Homes that are Hear and Treat or See and Treat
  - Emergency Admissions from care homes for respiratory condition
  - Emergency admissions from care homes for injuries following falls
  - Emergency admissions from care homes for non-injurious falls

But higher than average for 999 calls from Care Homes that are See and

Convey



## Key

- In the lowest number quartile for Sussex
- In the inter-quartile period for Sussex
- In the highest quartile for Sussex
  - No comparison made

(lowest or highest quartile does not mean good or bad)

Registered Care Homes

**480**Care Home Beds

**171**999 Calls from Care
Homes in last 12
months

6.1%

of 999 calls were Hear & Treat

**Sussex: 8.0%** 

33.4%

of 999 calls were See and Treat

Sussex: 38.6%

60.5%

of 999 calls were See & Convey

Sussex: 53.4%

61.22

A&E Attendances in the last 12months per 100 beds

Sussex: 53.60

50.0%

of A&E Attendances were subsequently admitted to an Inpatient bed

Sussex: 54.8%

29.82

Emergency Admissions in the last 12months per 100 beds

Sussex: 36.08

10.79

Emergency Admissions for Respiratory in the last 12months per 100 beds

Sussex: 13.01

3.17

Emergency Admissions for Injuries following Falls in the last 12months per 100 beds

Sussex: 5.20

0.71

Emergency Admissions for Non Injurious Falls in the last 12months per 100 beds

**Sussex: 1.63** 

# Adult Social Care – Brighton & Hove North ICT

- The number of contacts received by Adult Social Care (ASC) is reported differently across the three areas of Sussex.
- Within Brighton & Hove, Brighton & Hove North ICT has a lower level of contacts
- A lower proportion of the adult population in Brighton & Hove North ICT are:
  - Receiving long term support
  - In permanent Residential care
  - Receiving long term support in the community

1.5%

of Adult Population receiving Long Term Support Sussex: xx 0.3%

Sussex: xx

of Adult population In permanent Nursing Care 0.3%

of Adult population in permanent Residential Care Sussex: xx 0.9%

of Adult population in Community receiving long term support Sussex: xx

48.7%

Proportion of service users who reported enough social contact **Sussex: xx** 

30.5%

115

Contacts received by

ASC in last 12m

Sussex: xx

(per 100k Adult pop)

Proportion of carers who reported enough social contact
Sussex: xx

19.5

82.1%

Proportion of people

rehab/intermediate care

65+ who are still at

home 3m after

Sussex: xx

Av service user's Quality of Life Score from ASC Survey Sussex: xx 7.31

Av Carers Quality of Life Score from ASC Survey Sussex: xx

## Key

In the lowest Quartile for Sussex

In the inter-quartile period for Sussex

In the highest quartile for Sussex

No comparison made

(lowest or highest quartile does not mean good or bad)

293.5

S42 Safeguarding episodes in last 12m (per 100k Adult pop) Sussex: xx XX

Other safeguarding enquiries in last 12m (per 100k Adult pop)
Sussex: xx

1,466

All concerns related to safeguarding in last 12m (per 100k Adult pop) Sussex: xx XX

Not Safeguarding
Concern/Enquiry in last
12m
(per 100k Adult pop)
Sussex: xx

# Links to key resources

## Local mappings sites

- Community insight Brighton & Hove <u>Local Insight (communityinsight.org)</u>
- East Sussex in figures <u>Welcome to ESiF (eastsussexinfigures.org.uk)</u>

### **JSNAs**

- Brighton & Hove <u>Joint Strategic Needs Assessment (JSNA) (brighton-hove.gov.uk)</u>
- East Sussex East Sussex Joint Strategic Needs Assessment | (eastsussexjsna.org.uk)
- West Sussex <u>Welcome to the West Sussex JSNA West Sussex JSNA Website</u>

### National tools with local area data

- SHAPE tool <a href="SHAPE">SHAPE Shape (shapeatlas.net)</a> (registration required)
- Fingertips Public Health Profiles Public health profiles OHID (phe.org.uk)
- Census area profile builder <u>Build a custom area profile Office for National Statistics (ons.gov.uk)</u>

## **NHS Sussex ICB**

- Sussex Insight bank <a href="https://int.sussex.ics.nhs.uk/nhs-sussex/tools-for-your-work/insight-bank/">https://int.sussex.ics.nhs.uk/nhs-sussex/tools-for-your-work/insight-bank/</a>
- ICB Information Station